


Rate Floor Data

TO BE COMPLETED BY THE REPORTING CARRIER. IF AN AGENT IS FILING RATE FLOOR DATA ON THE CARRIER'S BEHALF:

**Certification of Officer to Authorize an Agent to File Rate Floor Data on Behalf of Reporting Carrier**

I certify that National Exchange Carrier Association (NECA) is authorized to submit the information reported on behalf of the reporting carrier. I also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the actual rate floor data provided to the authorized agent; and, to the best of my knowledge, the actual rate floor data provided to the authorized agent is accurate.

I certify that I am authorized to submit the information reported on this form on behalf of the reporting carrier; that I have provided the information reported herein based on data provided by the reporting carrier; and to the best of my knowledge the information reported herein is accurate.

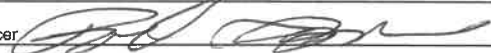
Name of Authorized Agent <u>National Exchange Carrier Association (NECA)</u>			
Name of Reporting Carrier <u>Kennebec Telephone Co., Inc.</u>			
Signature of authorized officer 			Date <u>06/05/2018</u>
Printed name of authorized officer <u>Rod Bowar</u>			
Title or position of authorized officer <u>President/Manager</u>			
Telephone number of authorized officer: <u>(605) 869-2220</u> ext.			
Study Area Code of Reporting Carrier	<u>391668</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>07/01/2018</u>

Rate Floor Template

**Certification of Officer as to the Accuracy of the Data Reported for the Rate Floor Data**

**I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the actual rate floor data reported ; and, to the best of my knowledge, the information reported on this form is accurate.**

Name of Reporting Carrier **Kennebec Telephone Co., Inc.**

Signature of authorized officer  Date **06/05/2018**

Printed name of authorized officer **Rod Bowar**

Title or position of authorized officer **President/Manager**

Telephone number of authorized officer: **(605) 869-2220**, ext.

Study Area Code of Reporting Carrier	<b>391668</b>	Filing Due Date for this form (mm/dd/yyyy)	<b>07/01/2018</b>
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